

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	KGS	43 705	7/7/01 08/15/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		1691	10-15-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	N	N
7	✓	N	N
8	✓	✓	✓
9	✓	✓	✓
10	✓	✓	=
11	✓	✓	=
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13	✓	✓	=
14	✓	✓	=
15	✓	✓	=
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If more than 150 claims or 10 actions
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Claim	Final	Original	Date
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